

# "FEE ADDRESS" INDICATION FORM

Address to:  
Mail Stop M Correspondence  
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Please recognize as the "Fee Address" under the provisions of 37 CFR 1.363 the address associated with the following customer number:

☒ Customer Number

009486

(Type Customer Name here)

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**OR**

☐ Request for Customer Number (PTO/SB/125) attached hereto

In the following listed application(s) for which the Issue Fee has been paid or patent(s).

PATENT NUMBER (if known)	APPLICATION NUMBER
7,780,012	

(check one)

☐ Applicant/Inventor

/Sun Y. Pae/

Signature

☒ Attorney or Agent of record 61401  
(Reg. No.)

Sun Y. Pae

Typed or printed name

☐ Assignee of record of the entire interest. See  
37 CFR 3.71. Statement under 37 CFR 3.73 (b)  
is enclosed. (Form PTO/SB/96)

815-633-5300

Requestor's Telephone Number

☐ Assignment recorded at Reel      Frame

September 7, 2010

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 form is submitted.